

Provider Inspection Summary
For the period 04/01/2003 to 03/31/2006
Community Based Residential Facility
CLASS CNA (NONAMBULATORY)

Facility Information

Facility Name: REM WISCONSIN II INC NICHOLSON (0010403)
Address: 1009 NICHOLSON AVE, SOUTH MILWAUKEE, WI 53172
License Status: REGULAR
Licensed/Certified/Registered 07/01/2004
Regional Office: SOUTHEASTERN REGION (MILWAUKEE), (414) 227-2005

Survey History

Survey ID: 0095468	End Date: 07/25/2005	Type: OTHER	Purpose: COMPLAINT
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Results: NO STATEMENT OF DEFICIENCY ISSUED

Survey ID: 0092644	End Date: 05/27/2004	Type: STANDARD	Purpose: SURVEY
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Results: LICENSE/CERT/REGISTRATION ISSUED

Survey ID: 0091765	End Date: 12/26/2003	Type: INITIAL	Purpose: SURVEY
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Results: PROBATIONARY LICENSE ISSUED

Disclaimer: This information is provided as a public service by the Wisconsin Department of Health and Family Services (DHFS). The Department neither endorses any facility nor guarantees that this information is accurate, up-to-date, or complete. This information, which should not be used as a sole source in selecting a facility, does not replace official information sources.

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Complaint History

Date Complaint Received: 03/24/2005

Date Investigation Completed: 07/25/2005

Subject Area(s)
RESIDENT RIGHTS

Result
SUBSTANTIATED

SOD #
NOT RECORDED

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